

# UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No.: **US20020115**  
 Inventor Name(s): **Cas y J. Tubman et al.**  
 Title: **ADJUSTABLE CLOTHES HANGER**  
 Express Mail Label No. **EV 118532957 US**

21908 U.S. PTO  
10/622161



<b>APPLICATION ELEMENTS</b>	<b>ADDRESS TO:</b> Assistant commissioner for Patents Box Patent Application Washington, DC 20231
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- ☒ Fee Transmittal Form
- ☒ Patent Application data Entry Form
- ☒ Specification comprising (12) pages, (20) claims.
- ☒ Drawings ( two) (2) sheets
- ☒ Declaration and Power of Attorney

## ACCOMPANYING APPLICATION PARTS

- ☒ Assignment Papers (cover sheet and document(s))
- ☒ Information Disclosure Statement (IDS)/PTO-1449
- ☐ Copies of IDS citations
- ☐ Preliminary Amendment
- ☒ Return Receipt Postcard
- ☐ Other:

## IF A CONTINUING APPLICATION

☐ Non-Provisional of Provisional ☐ Continuation ☐ Divisional ☐ Continuation-in-Part (CIP) of  
 prior application No: Filed:

## CORRESPONDENCE ADDRESS

Name	WHIRLPOOL PATENTS COMPANY – MD 0750				
Address	500 Renaissance Drive Suite 102				
City	St. Joseph	State	Michigan	Zip Code	49085
County	Berrien	Telephone	269-923-6439	Fax	269-923-5778

Name	JOHN F. COLLIGAN	Registration No.	Date
Signature		48,240	7-17-03

## CERTIFICATE OF MAILING

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as Express Mail in an envelope addressed to the: Commissioner for Patents, Washington, D.C. 20231

Date: July 17, 2003

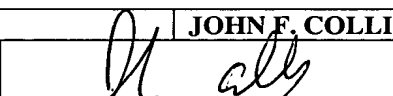
Barbara L. Katowich

16711 U.S. PTO  
07/17/03

<b><u>FEE TRANSMITTAL FORM</u></b>			Application No.: To be assigned Filing Date: Concurrently herewith Inventor(s): Casey J. Tubman et al. Title: ADJUSTABLE CLOTHES HANGER Attorney Docket No.: US20020115		
Total Amount of Payment <b>\$750.00</b>					
<b>CLAIMS AS FILED - PART I</b>			<b>OTHER THAN SMALL ENTITY</b>		
	Number Filed		Number Extra	Rate	Fee
Basic Fee	1		0	\$750.00	\$750.00
Total Claims	20	-20	0	x \$18 =	0
Independent Claims	3	-3	0	x \$84=	0
			TOTAL FEE =		\$750.00

CLAIMS AS AMENDED - PART II						
<b>AMENDMENT A</b>	Claims Remaining After Amendment		Highest Number Previously Paid For	Present Extra	Rate	Additional Fee
Total		Minus	20		\$18	
Independent Claims		Minus			\$84	
TOTAL FEE =					\$	

<b>AMENDMENT B</b>	Claims Remaining After Amendment		Highest Number Previously Paid For	Present Extra	Rate	Additional Fee
Total		Minus			\$18	
Independent Claims		Minus			\$84	
TOTAL FEE =						

SUBMITTED BY:			
Name	JOHN F. COLLIGAN		Registration No. 48,240
Signature			Date: 7-17-03

Charge Deposit Account No. **23-1660** in the amount of **\$750.00**

The commissioner is hereby authorized to charge any additional fees which may be required or to credit any overpayment to account **23-1660**.